| | Application No. | Applicant(s) | |
|--|--|--|----------|
| Interview Summary | 10/082,094 | OGIMOTO, SHINICHI | |
| | Examiner | Art Unit | |
| | Minh Trinh | 3729 | |
| All participants (applicant, applicant's representative, PTO personnel): | | | |
| (1) <u>Dong Hai Nguyen</u> . | (3) <u>Minh Trinh</u> . | | |
| (2) <u>James D. Hamilton</u> . | (4) | | |
| Date of Interview: <u>09 May 2006</u> . | | | |
| Type: a)☐ Telephonic b)☐ Video Conference c)☑ Personal [copy given to: 1)☐ applicant 2)☑ applicant's representative] | | | |
| Exhibit shown or demonstration conducted: d) Yes e) No. If Yes, brief description: | | | |
| Claim(s) discussed: pending claims of the record. | | | |
| Identification of prior art discussed: of the record (APA). | | | |
| Agreement with respect to the claims f) was reached. g |)□ was not reached. h)⊠ N | /A. | |
| Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: Applicant discussed differences between their invention and the applied prior art references APA. Particularly, discussion about the possible language should be added to the claims in order to distinguish from the prior art of references and the rejections under 35 USC 112 second paragraph. No agreement was reached on the patentability at this point. Applicant will filed proposed amendment (see attached) for formal consideration. | | | |
| (A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.) | | | |
| THE FORMAL WRITTEN REPLY TO THE LAST OFFICE AN INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER (INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW DATE, OR THE SUBSTANCE OF THE INTERTED INTERVIEW ON REVERSE SIDE OF ON Attached Sheet. | last Office action has already DF ONE MONTH OR THIRTY ERVIEW SUMMARY FORM, V | been filed, APPL DAYS FROM TI VHICHEVER IS | ICANT IS |
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Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

Examiner's signature, if required